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OCT 2 8 2014 S.D. SEC. OF STATE

#### State of South Dakota Campaign Finance Disclosure Statement

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Full Name of Committee: Have	stin Cou	inty L	emocra	to to	arty
Committee Chair Treasurer, Candidate	CY V E-r	ndako	ta@it	ctel.	OW_
258 W. Lake D.	<i>(</i> ,				
Committee Street Address  Lake Novden Committee Postal Address	2D 5-	1248	j		
Name of Person Making Report	605 Da	785 ytime Telephone #	3811	52C	0349
If Candidate Committee, please note office being sough	t, and District # (If applic	able)	Political part	ty affiliation (if any)	
If Ballot Question Committee, Ballot Question number of	r letter.		Supporting?	Opposi	ng?
Type of Campaign Statement:  Pre-Primary Pre-Convention Pre-General	l Mid-Year	Year-End	Amendment	Supplement	Termination

#### **VERIFICATION OF PERSON MAKING REPORT**

(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty per day for each day that the statement remains delinquent.

Oct 24, 2014

Date

Signature of Treasurer

**County, municipal and school** candidates file this statement with the person in charge of the local election.

**Statewide PACs, political party, ballot question and other committees** file this statement with the Secretary of State's Office.

Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 or fax to 605-773-6580 or e-mail to cash@state.sd.us

Fax and e-mail images must contain the signature(s) and the **original must be filed in our office within one week** following the date the fax/e-mail was received.

## **INCOME**

#### **Direct Contributions from Individuals**

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributions from Individuals	Amount
Enter total of all unitemized contributions (\$100 or less each from individuals) here:	\$ 100 .

Line item A1

Enter all itemized contribut	ons (\$100 or more each from individuals) below:	
Name	Residential (Street) Address	Amoun
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# **EXPENDITURES**

#### **Operational Expenditures**

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Campaign Expenses		Amount
Advertising HenrenCountyPublishing Ad	\$ 6 3.	.75
Consulting	\$	
Interest	\$	
Postage	\$	
Printing	\$	
Rent	\$	
Salaries	\$	
Telephone	\$	
Travel	\$	-
Utilities	\$	
List other expense items below:	\$	
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	\$	
Enter total expenditures here:	\$ 63	.75

Line item X1

### **SUMMARY OF INCOME AND EXPENDITURES**

		Credit		Debit		
	Candidate's Personal Contribution to Own Campaign	\$				
ncome:				$\vdash$		
	Unitemized Contributions	\$ 10	2.0			
	Itemized Contributions	\$				1000
	Contributions from Candidate Committees	\$				100000
	Contributions from Organizations	\$				
	Contributions from Political Parties	\$				
	Contributions from In-State PACs	\$			ADDRESS STREET	
	Contributions from Out-of-State or Federal PACs	\$			i ies	
	In Kind Contributions	\$				
	Other Income	\$				15727
·	Expenditures from an external source to establish a committee	\$				
xpenditures						
	Operational Expenditures			\$	63	.7
	Contributions to Candidates and Committees			\$		
	Debts and Obligations Owed by the Committee			\$		
oan Activity						
	Monetary loan made to Candidate or Committee during reporting period	\$		1000		
	Monetary loan made to Candidate or Committee repaid during reporting period			\$		
	Monetary loan made by Committee during reporting period			\$		
	Monetary loan repaid to Committee during the reporting period	\$				

\*Note: You cannot end the reporting period with a negative balance.

County, municipal and school candidates file with the person in charge of the local election.